

**Alabama Workers Compensation Division**  
**IAIABC Claims EDI Release 3**  
**Documentation Overview for EDI Implementation**

## Electronic Claims Filing

### Appendix A

#### Trading Partner Agreement:

This form is designed to document agreement on a set of expectations and responses between two entities exchanging data electronically, for the purposes and objectives set out in the agreement. By means of this document, the Sender should be considered as having fulfilled all requirements by the jurisdiction or all related governmental entity for applying for permission to file information electronically. The sample form provided on this Web site already contains certain expectations recommended by the International Association of Industrial Accident Boards and Commissions (IAIABC). Careful consideration of both demonstrated business needs as well as data availability must be given when establishing data element requirements between trading partners. The IAIABC recommends that data requesters meet with data providers to develop a consensus regarding which data elements should be collected and reported.

#### TRADING PARTNER PROFILE:

This form is designed to individually document identification and contact information for each trading partner providing data (whether the partner is the Sender, the insuring claims data source, or the receiving jurisdiction). This form will uniquely identify a trading partner. Members of the partnership fill out the form as it pertains to them. The partners then exchange the completed forms. In the Trading Partner Type section, check all the descriptors that apply to the partner identified in the next section of the form. For example, if the trading partner is a carrier ensuring some claims but is also acting as a third party administrator on other claims, the partner should at least check both "Insurer" and "Third Party Administrator." **Sender ID:** A composite of FEIN (Federal Employer Identification Number of your business entity) and the 9-digit Postal Code (Zip+4) in the trading partner address field will be used to identify a unique trading partner. The Sender ID FEIN and Postal Code should be the same as those that the partner will use as the Sender ID in the Header Record of all of its EDI transmissions. **Contact Information:** This section provides the ability to identify individuals within your business entity who can be used as the main contacts for this trading partner agreement. Two types of contacts should be identified: one for business practices and issues, and one for technical issues.

#### TRANSMISSION PROFILE:

##### AWCD Specifications/Sender's Response:

Alabama Workers Compensation Division (AWCD) specifications are used to communicate all allowable options that AWCD currently provides to the transmission partner. Please complete the Transmission Profile: Sender's Response form (Appendix F) providing your data in the allocated spaces, and indicating your selections where choices are provided by AWCD. Detailed instructions for completing the Transmissions Profile: Sender's Response can be found in Section 3 of IAIABC's EDI Implementation Guide.

#### Insurer/Claims Administrator ID List:

This form is designed to document the identities of trading partners using the same third-party administrator or other Sender to transmit data electronically to the jurisdiction. In conjunction with an individual and separate IAIABC Electronic Partnering Agreement for each trading partner, by means of this document the Sender should be considered as having fulfilled all requirements by the jurisdiction or all related governmental entity for applying for permission to file information electronically. The jurisdiction should complete the section labeled 'To' and the Sender should complete the remainder of the form. In the table in the lower portion of the form, provide the full Insurer Legal Name, Insurer FEIN, and Jurisdiction Assigned ID (Insurer identification code), if applicable, for each insurer (carrier, self-insurer, or group-funded pool) for whose claims the Sender will be transmitting data. The jurisdiction must notify the Sender of any discrepancy between the identifying information in the table and the jurisdiction's present records. This list will be used to reconcile identification tables. It is understood that this list will have entries added or removed from time to time for which an updated report should be sent to the jurisdiction. Attach additional sheets as needed.



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**Data Elements Requirement Table:**

The Data Elements Requirement Table is designed to convey the requirements for each data element as coordinated with the Maintenance Type Code. It indicates the condition that would cause an error, corresponding element error number, and error message associated with the error. It also indicates the application acknowledgment code returned for the error, the condition for the conditional data elements, and processing notes, if applicable.

**Transaction Set IDs:** 148 - First Report  
R21 - First Report of Injury Companion Record  
A49 - Subsequent Report of Injury  
R22 - Subsequent Report of Injury Companion Record

**Requirement Code:** Defines the level of reporting required by AWCD.

**M - Mandatory:** This is a required data element. All edits must pass, or the entire transaction will be rejected.

**C - Conditional:** The data element is normally optional but may be required by AWCD. If the edits cause the data element to fail, the transaction may still be accepted.

**O - Optional:** This data element is optional.

**Acknowledgement Process: \* Note: AWCD acknowledgement process will be made available later.**

**Application Acknowledgement code:** Code used to notify the sender of the data element results.

**TA** - Transaction accepted  
**TE** - Transaction accepted with errors  
**TR** - Transaction rejected  
**HD** - Batch rejected

**Maintenance Type Code (MTC)** defines the event for which the transaction is being triggered.

**The following MTC's are available for FROI processing.**

**00 = ORIGINAL** - The original/initial first report transmitted between partners, including retransmission of a First Report that was rejected due to a critical error. A critical error is when a mandatory field does not meet AWCD requirements.

**01 = CANCEL** - When the Claim Administrator becomes aware that the originating FROI needs to be cancelled, and it can be used to report a jurisdiction transfer after indemnity if not currently being paid.

**02 = CHANGE** - A change has been made to a First Report data element. A First Report must have been previously filed.

**04 = DENIAL** - When the claim administrator has determined to deny the claim.

**AQ = ACQUIRED CLAIM** - When the claim administrator acquires an open or (closed claim for last 12 years)

**AU = ACQUIRED/UNALLOCATED** - When an AQ receives a TR because there is no match, the claim administrator is required to submit an AU.



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The following MTC's are available for SROI processing.

02 = CHANGE

04 = Denial

AP = Acquired/Payment

CA = Change in Benefit Amount

CB = Change in Benefit Type

CD = Compensable Death without Dependents or Payees

FN = Final

IP = Initial Payment

RB = Reinstatement of Benefits

UI = Under Investigation

P9 = Partial Suspended Pending Settlement Approval

PY = Payment Report

S1 = Suspension, RTW, or Medically Determined/Qualified RTW

S2 = Suspension, Medical Non-compliance

S4 = Suspension, Claimant Death

S8 = Suspension, Jurisdiction Change

BM – Bi-Monthly

SA = Sub-Annual

**SROI processing and Go-Live Mandate.**

All SROI received will be new activity and reported against existing claims only as of go-live.

